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Fax Number: 571-273-8300File Reference: 132702-96

From:

Name: William J. ClemensDate: August 3, 2005 Time: 3:53 PM☐ Please Confirm TransmissionContact Phone No 248-593-3019

Message: Please see the following Amendment and Fee Transmittal form for filing in patent application S/N 10/694,378.

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PTO/SB/17 (12/04v2)

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FEE TRANSMITTAL For FY 2005 <small>Effective 01/01/2003. Patent fees are subject to annual revision.</small>		Complete if known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/694,378
		Filing Date	10/27/2003
		First Named Inventor	Roland Eichhorn et al.
		Examiner Name	Shaun Hurley
		Group/Art Unit	3765
TOTAL AMOUNT OF PAYMENT (\$ 350)		Attorney Docket No.	132702-0096
METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify) _____			
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number <u>12-2136</u> Deposit Account Name <u>Butzel Long</u>			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)			
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Credit any overpayments			
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FEE CALCULATION			
1. Basic Filing, Search, and Examination Fees			
FILING FEES		SEARCH FEES	
Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)
Utility	300	500	200
Design	200	100	130
Plant	200	300	160
Reissue	300	500	600
Provisional	200	0	0
		EXAMINATION FEES	
		Small Entity	
		Fee (\$)	Fee (\$)
		100	65
		150	80
		300	300
		0	0
		Fees Paid (\$)	
2. EXCESS CLAIM FEES			
Fee Description		Small Entity	
		Fee (\$)	Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent		50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent		200	100
Multiple dependent claims		360	180
		Multiple Dependent Claims	
		Fee (\$)	Fee Paid (\$)
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
<u>23</u> -20 or HP =	<u>3</u> x	<u>50</u>	<u>150</u>
HP = highest number of total claims paid for, if greater than 20.			
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
<u>4</u> -3 or HP =	<u>1</u> x	<u>200</u>	<u>200</u>
HP = highest number of independent claims paid for, if greater than 3.			
3. APPLICATION SIZE FEE			
<small>If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).</small>			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)
		/50 =	(round up to a whole number)
			x
			=
			Fee Paid (\$)
4. OTHER FEE(S)			
Non-English Specification, \$130 fee (no small entity discount)			
Other (e.g., late filing surcharge):			
SUBMITTED BY			Complete (if applicable)
Typed or Printed Name	William J. Clemens		Reg. No. 26,855
Signature			Date August 3, 2005

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22311-1450

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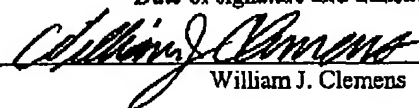
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By


William J. Clemens

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: EICHHORN et al.)	Group Art Unit: 3765
)	
Serial No.: 10/694,378)	Examiner: S. Hurley
)	
Filed: October 27, 2003)	Attorney Docket: 132702-96
)	(formerly 16578)
For: ROPE OF SYNTHETIC FIBER WITH)	
<u>REINFORCEMENT ELEMENT FOR ...</u>)	


Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Honorable Sir:

Please amend the above-identified application as indicated on the following pages.

Respectfully submitted,


William J. Clemens, Reg. No. 26,855
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08/04/2005 HNGUYEN1 00000024 122136 10694378

01 FC:1201 200.00 DA
02 FC:1202 150.00 DA

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